

Small Group Off Exchange Plans- 2014											
Harvard Pilgrim Health Care Inc.											
HMO Products											
Plan ID	HSA HMO 3500	HSA HMO 4000	HSA HMO 5000	Ded Tiered Copay HMO 2000	Ded Tiered Copay HMO 2000	Ded Tiered Copay HMO 2500	Ded Tiered Copay HMO 2500	HSA HMO 2500	Ded Tiered Copay HMO 3000	Ded Tiered Copay HMO 3000	Ded Tiered Copay HMO 1500
Metal Level	Bronze	Bronze	Bronze	Silver	Silver	Silver	Silver	Silver	Silver	Silver	Gold
Medical Deductible	\$3,500	\$4,000	\$5,000	\$2,000	\$2,000	\$2,500	\$2,500	\$2,500	\$3,000	\$3,000	\$1,500
Coinsurance Member's Share	30%	20%	20%	30%	30%	30%	30%	10%	30%	30%	20%
Medical OOP Max	\$6,350	\$6,350	\$6,350	\$5,000	\$5,000	\$5,000	\$5,000	\$4,500	\$6,000	\$6,000	\$2,500
Drug OOP Max	Combined w/ Medical	Combined w/ Medical	Combined w/ Medical	Combined w/ Medical	Combined w/ Medical	Combined w/ Medical	Combined w/ Medical	Combined w/ Medical	Combined w/ Medical	Combined w/ Medical	Combined w/ Medical
Drug Deductible	Combined w/ Medical	Combined w/ Medical	Combined w/ Medical	\$0	\$250	\$0	\$250	Combined w/ Medical	\$0	\$250	\$0
Child Dental	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Plan Factor	0.6198	0.6022	0.5494	0.870	0.825	0.859	0.814	0.787	0.823	0.778	1.000
Base Rate	\$308.61										

HPHC Insurance Company													
PPO Products													
Plan ID	HSA PPO 3500	HSA PPO 4000	HSA PPO 5000	Ded Tiered Copay PPO 2000	Ded Tiered Copay PPO 2000	Core Coverage PPO	Core Coverage PPO	Ded Tiered Copay PPO 2500	Ded Tiered Copay PPO 2500	HSA PPO 2500	Ded Tiered Copay PPO 3000	Ded Tiered Copay PPO 3000	Ded Tiered Copay PPO 1500
Metal Level	Bronze	Bronze	Bronze	Silver	Silver	Silver	Silver	Silver	Silver	Silver	Silver	Silver	Gold
Medical Deductible	\$3,500	\$4,000	\$5,000	\$2,000	\$2,000	\$2,500	\$2,500	\$2,500	\$2,500	\$2,500	\$3,000	\$3,000	\$1,500
Coinsurance Member's Share	30%	20%	20%	30%	30%	20%	20%	30%	30%	10%	30%	30%	20%
Medical OOP Max	\$6,350	\$6,350	\$6,350	\$5,000	\$5,000	\$5,000	\$5,000	\$5,000	\$5,000	\$4,500	\$6,000	\$6,000	\$2,500
Drug OOP Max	Combined w/ Medical	Combined w/ Medical	Combined w/ Medical	\$3,500	\$3,500	\$3,500	\$3,500	\$3,500	\$3,500	Combined w/ Medical	\$3,500	\$3,500	\$3,500
Drug Deductible	Combined w/ Medical	Combined w/ Medical	Combined w/ Medical	\$0	\$250	\$0	\$250	\$0	\$250	Combined w/ Medical	\$0	\$250	\$0
Child Dental	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Plan Factor	0.6138	0.5966	0.5432	0.884455	0.83995	0.825937	0.78147	0.85666	0.81216	0.77426	0.817	0.7725	1
Base Rate	\$328.79												

*Plans may have different copayments on certain services and prescription drugs. Please check the schedule of benefits available from the carrier.

Maine Bureau of Insurance 09/25/2013

Small Group Plan Factors

Tobacco Factors		
Harvard		None
HPHC		None

Area Factors	Harvard	HPHC
1	0.942	0.942
2	1.055	1.055
3	1.085	1.085
4	1.413	1.413

Area	Counties					
1	Cumberland	Sagadahoc	York			
2	Knox	Kennebec	Lincoln	Oxford		
3*	Androscoggin	Waldo	Franklin	Penobscot	Somerset	Piscataquis
4	Hancock	Aroostook	Washington			

Monthly Premium =(Base Rate* Plan Factor*Trend Factor*Area Factor*Age Factor*Tobacco Factor)

Monthly-2014	Harvard Trend	HPIC Trend
January	1.000	1.000
February	1.006	1.006
March	1.012	1.013
April	1.018	1.019
May	1.024	1.026
June	1.030	1.033
July	1.036	1.039
August	1.042	1.046
September	1.048	1.053
October	1.054	1.060
November	1.060	1.066
December	1.067	1.073

Age Factors	
0-20	0.635
21-24	1.000
25	1.004
26	1.024
27	1.048
28	1.087
29	1.119
30	1.135
31	1.159
32	1.183
33	1.198
34	1.214
35	1.222
36	1.230
37	1.238
38	1.246
39	1.262
40	1.278
41	1.302
42	1.325
43	1.357
44	1.397
45	1.444
46	1.500
47	1.563
48	1.635
49	1.706
50	1.786
51	1.865
52	1.952
53	2.040
54	2.135
55	2.230
56	2.333
57	2.437
58	2.548
59	2.603
60	2.714
61	2.810
62	2.873
63	2.952
64 +	3.000

Maine Bureau of Insurance

9/24/2013